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## \*BIBDATASHEET\*

**Bib Data Sheet** 

**CONFIRMATION NO. 5337** 

| SERIAL NUMBE<br>10/648,402   | FILING DATE 08/27/2003 10/648,402 RULE |    | CLASS<br>014 |               | GROUP ART UNIT<br>3671 |             | ATTORNEY<br>DOCKET NO.<br>87269.4041 |  |             |
|--|--|----|--------------|---------------|------------------------|-------------|--------------------------------------|--|-------------|
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| ** CONTINUING DATA **********************************  |  |    |              |               |                        |             |                                      |  |             |
| Foreign Priority claime  | STATE OR                               | SH | SHEETS TO    |               | TAL                    | INDEPENDENT |                                      |  |             |
| 35 USC 119 (a-d) conditions  yes no Met after  whet  w |  |    |              | COUNTRY<br>TX | DR                     | RAWING CLAI |                                      |  | CLAIMS<br>5 |
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| TITLE Support leg system and method for supporting a dock leveler  |  |    |              |               |                        |             |                                      |  |             |
|  | ☐ All Fees                             |    |              |               |                        |             |                                      |  |             |
|  | 1.16 Fees (Filing)                     |    |              |               |                        |             |                                      |  |             |
| FILING FEE FEES: Authority has been given in Paper  No to charge/credit DEPOSIT ACCOUNT  |  |    |              |               |                        |             |                                      |  |             |
| 1  | No for following: 1.18 Fees ( Issue )  |    |              |               |                        |             |                                      |  |             |
| Other  |  |    |              |               |                        |             |                                      |  |             |